

PATENT  
Docket No.: 1038-1160

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Loosmore et al.  
Application No.: 09/857,843  
Filing Date : December 15, 1999  
Title : Multicomponent Vaccine Comprising at least Two  
Antigens From Haemophilus Influenzae To  
Protect Against Disease

FAX RECEIVED

MAY 06 2003

GROUP 1600

OFFICIAL

U.S. Patent and Trademark Office

SENT BY FACSIMILE 1 703 872 9306

4 PAGES

REVOCATION AND POWER OF ATTORNEY

Dear Sir:

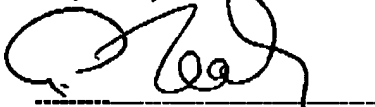
Attached is a Revocation of Power of Attorney for the above identified application and an authorization of agent.

Please direct all future communications relative to said application to the following correspondence address:

GAVIN ZEALEY  
AVENTIS PASTEUR  
1755 STEELES AVE WEST  
TORONTO  
CANADA M2R 3T4

TEL 416 667 2854  
FACSIMILE 416 667 2459

Respectfully submitted



Gavin R. Zealey May 5, 2003  
Reg. No. 39,475  
Customer Number 33 444

Please type a plus sign (+) inside this box → 

PTO/SB/82 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**REVOCATION OF POWER OF  
ATTORNEY OR  
AUTHORIZATION OF AGENT**

Application Number	09/857,843
Filing Date	December 15, 1999
First Named Inventor	Sheena M. Loosmore
Group Art Unit	1645
Examiner Name	Ja-Na A Hines
Attorney Docket Number	1038-1160

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

☒ A Power of Attorney or Authorization of Agent is submitted herewith.

OR

☐ Please change the correspondence address for the above-identified application to:☐ Customer Number Place Customer  
Number Bar Code  
Label here

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Aventis Pasteur Limited				
Address	1755 Steeles Avenue West				
Address					
City	Toronto				
Country	Canada	State	ON	ZIP	M2R 3T4
Telephone	416-667-2854	Fax	416-667-2459		

I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	Tony D'Amore	Name	James Tartaglia
Signature	Tony D'Amore V.P. Product Development	Signature	James Tartaglia V.P. R&D
Date	May 5/03	Date	May 5/03

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ \*Total of \_\_\_\_\_ forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box 

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**POWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT**

Application Number	09/857,643
Filing Date	December 15, 1999
First Named Inventor	Sheena M. Loosmore
Title	Multicomponent Vaccine Comprising at least Two antigens...
Group Art Unit	1845
Examiner Name	Ja-Na A Hines
Attorney Docket Number	1036-1160

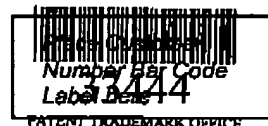
I hereby appoint:

☒ Practitioners at Customer Number 

OR

☐ Practitioner(s) named below:

Name	Registration Number



as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number.

OR

☐ Practitioners at Customer Number 

OR

Place Customer  
Number Bar Code  
Label here☒ Firm or  
Individual Name

Aventis Pasteur Limited

Address 1755 Steeles Avenue West

Address

City Toronto State Ontario Zip M2R 3T4

Country Canada

Telephone 416-667-2701 Fax 416-667-2459

I am the:

☐ Applicant/Inventor.
☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
**SIGNATURE of Applicant or Assignee of Record**

Name	Tony D'Amico V.P.	Name	James Tartaglia V.P. R&D
Signature		Signature	
Date	May 5/03 Development	Date	May 8/03

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Received from &lt;416 667 2459&gt; at 5/5/03 4:30:09 PM [Eastern Daylight Time]

PTO/SB/98 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**STATEMENT UNDER 37 CFR 3.73(b)**Applicant/Patent Owner: Aventis Pasteur LimitedApplication No./Patent No.: 09/857,843 Filed/Issue Date: December 15, 1999Entitled: Multicomponent Vaccine Comprising at least Two antigens from Haemophilus influenzae to Protect Against DiseaseAventis Pasteur Limited, a Corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.  
The extent (by, percentage) of its ownership interest is \_\_\_\_\_ %

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment assignment was recorded in the United States Patent and Trademark Office at Reel/Frame 013317/0733 013317/0724 013317/0711 or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.
2. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.
3. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

- ☐ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Date May 5, 2003Typed or printed name Tony D'AmoreSignature Tony D'AmoreTitle V.P. Process DevelopmentTyped or printed name James TagliaSignature James TagliaTitle VP R&D

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.